PTO/SB/21 (09-04) Approved for use through 07/31/2006.
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE erwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application Number** 10/743,538 Filing Date RANSMITTAL December 23, 2003 First Named Inventor **FORM** Nygaard et al. Art Unit 3641 **Examiner Name** Chambers, Troy (to be used for all correspondence after initial filing) Attorney Docket Number

NPS-PT057

ENCLOSURES (Check all that apply)									
$\boxtimes$	Fee Tran	smittal Form	X	Drawing(s)			After Allowance Communication to TC		
	X F	ee Attached		Licensing-related Papers			Appeal Communication to Board of Appeals and Interferences		
Amendment/Reply After Final Affidavits/declaration(s)  Extension of Time Request Express Abandonment Request Information Disclosure Statement  Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53		Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD Remarks		Docu	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): n PTO-1559 with Assignment ument; Statement Under 37 3.73(b) and Form PTO-2038				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT									
Firm Name		VOLPE AND KOENIG, P.C.							
Signature		fully land							
Printed name		Robert D. Leonard							
Date		30 SER 7	2005		Reg. No.	57,20	)4		

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE tion Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Fees pustant Consolidated Appropriations Act, 2005 (H.R. 4818). Complete if Known 10/743,538 **Application Number** TRANSMITTAL Filing Date December 23, 2003 For FY 2005 First Named Inventor Nygaard et al. Chambers, Troy **Examiner Name** X Applicant claims small entity status. See 37 CFR 1.27 Art Unit 3641 (\$) 550.00TOTAL AMOUNT OF PAYMENT NPS-PT057 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): 22-0493 Deposit Account Name: Volpe and Koenig, P.C. Deposit Account Deposit Account Number: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity Small Entity Small Entity** Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 200 100 250 Design 200 100 100 50 130 65 Plant 200 100 300 150 160 80 300 600 Reissue 150 500 250 300 200 100 0 0 Provisional 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee (\$) **Fee Description** Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 180 Multiple dependent claims Extra Claims Multiple Dependent Claims **Total Claims** Fee Paid (\$) Fee (\$) Fee Paid (\$) Fee (\$) HP = highest number of total claims paid for, if greater than 20 0.00 **Extra Claims** Fee Paid (\$) Indep. Claims Fee (\$) 0.00 HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

SUBMITTED BY	0/1/		
Signature	Palau UlliC	Registration No. 57,204 (Attorney/Agent)	Telephone 215-568-6400
Name (Print/Type)	Robert D. Leonard		Date 30 Sep 2005

Number of each additional 50 or fraction thereof

(round up to a whole number) x

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